Don't Ignore Sex In Senior Living — It Happens

Posted By <u>Cassandra Dowell</u> On July 30, 2014 @ 11:42 am In <u>Communities, Senior Care, Senior Living</u> | <u>Comments Disabled</u>

Sex in senior living is a delicate topic, but not one that is too taboo to discuss with staff and residents.

In fact, intimate relationships must be discussed to improve resident safety and happiness, said Stella Hatcliffe during a recent Mather LifeWays' webinar on the topic.

"Sexual health is important to an individual's self-identity and general well-being," Hatcliffe, director of professional education at Mather LifeWays said. "[Intimacy] fulfills social, emotional and psychological components of life. Sexual health is something we want to promote. It makes us feel good and valued."

Myths surrounding older Americans is that they are asexual, heterosexual or that sexual desires diminish with age, she said, adding that more than 1.5 million adults over the age of 65 identify as gay, lesbian, bisexual or transgender (LGBT).

"When communicating with older adults you need to embrace the concept of partner," she said. "All residents have the right to be treated with dignity and respect."

Seventy-three percent of Americans aged 57 to 64 report being sexually active, and 26% of those aged 75 to 84 report the same, said Hatciffe, adding that those numbers will likely increase as baby boomers age.

Protecting the privacy and promoting the safety of residents is key.

"If I'm a resident in your community, and you come into my room and I ask you, 'Where can I buy condoms?' You might say, 'We don't sell condoms,' or, a more positive way to respond would be to say, 'There's a pharmacy nearby, and I can guide you there,'" she said.

The risk of receiving a sexually transmitted disease increased 43% between 2005 and 2009 among seniors, she said.

One challenge for staff when identifying appropriate and inappropriate sexual behavior is when intimate actions happen between those with cognitive impairments.

"With residents with dementia, they can get confused about people and place and may have an increased need for personal security," she said. "They may have a loss of inhibitions, or poor judgement."

However, seniors with some cognitive impairments can still enjoy intimacy. For example, holding hands and hugging require a low level of mental capacity for consent. The greater the level of intimacy, the higher the level of mental capacity is needed to confirm consent.

Involving family members in the discussion of the types of relationships a resident is forming can also inform staff on how they should proceed.

If a resident begins acting inappropriately, it's important to consider other variables that might be affecting his or her behavior.

"Medication, drinking alcohol or other diseases might have an impact," she said. "Our responsibility is to protect the resident from harm and report offensive behavior immediately."

For employees who feel that a resident is speaking or acting to them in an inappropriate way, Hatcliffe advises to remain calm and be straightforward about the activity making them uncomfortable.

"Try not to feel embarrassed or show shock," she said. "You want to seek to preserve the

resident's dignity. It is acceptable to share that you feel uncomfortable. Remind the resident who you are.

"At the end of the day, the resident may have no awareness that their behavior is inappropriate."

Ultimately, when it comes to relationships in senior living communities, much like relationships formed outside residence walls, no one size fits all.

"Have an open discussion," she said. "Encourage staff to reflect on personal values. It helps me to think, 'We're working in their home, not a workplace.'"

Written by Cassandra Dowell [1]

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URL to article: http://seniorhousingnews.com/2014/07/30/dont-ignore-sex-in-senior-living-it-happens/

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